

Multi NDA Neighborhood Grant Program APPLICATION

Date:	Project:			
Project Contact Person:				
Phone:	E-mail			
Mailing Address (street):				
City/State:				
Amount Being Requested	d: \$			
Partnering Organizations (if any:				
Please describe the goal <u>and</u> the need for the proposed project/program.				
Who will be involved in the project/program and how has support evolved in the neighborhoods?				
Project Time Frame : Be	ginning Date	End Date		
The grant money will be	spent as follows:			

If this grant is approved by the Milwaukie NDA s, your organization will be required to submit a brief report within 60 days after the event on how the money was used in relation to the grant criteria.

-	eets at least one of the following applicability criteria fo nood. Check the appropriate box(s):	r value to the			
	,	activities, services and materials that generate new neighborhood membership, grow the organization or educate neighborhood leadership toward the organization's development			
	(2) Neighborhood Physical Improvements materials and services to be used toward playgrounds, more community gardens or other facilities, neighborhood mark trash cans, benches, etc.				
	the neighborhood such as crime watch, traffic manageme programs; or contribute positively to the neighborhood's a	materials and services that sustain or enhance the health, public safety and welfare of the neighborhood such as crime watch, traffic management, or home weatherization programs; or contribute positively to the neighborhood's aesthetic quality such as design guideline development, community property maintenance programs or beautification			
	(4) Neighborhood Cultural, Social or Recreational Initiatives materials and services that promote diversity, family literated computer labs, after school enrichment programs, youth a services for the needy, disabled or elderly and cultural act programs.	thletic leagues, career preparation,			
The project co	complies with all City, County and State Codes, including ADA and	diversity[] Yes [] No			
Comments:	5:				
Applicant's S	Signature:				
Title:					
Date:					
Approved by: [] Ardenwald/JC [] Hector Campbell [] Historic Milwaukie [] Island Station [] Lake Road		Date Date Date Date Date Date			
[] Lewelling		Date			
L] LINWOOD	od	Date			

Report received []

Proposal Criteria